



PATENT  
Attorney Docket No. INL-052

12

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GROUP 1700

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Xu et al.  
SERIAL NO.: 09/871,885 GROUP NO.: 1744  
FILING DATE: May 31, 2001 EXAMINER: Not yet assigned.  
TITLE: ANALYTICAL INSTRUMENTS, BIOSENSORS AND METHODS  
THEREOF

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the patent listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. A copy of the patent is enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed (CHECK ONE):

- ☒ (1) within three (3) months of the **filing date** of a national application other than a continued prosecution application under 37 C.F.R. 1.53(d), or within three (3) months of the **date of entry of the national stage** as set forth in 37 C.F.R. 1.491 in an international application, or before the mailing of the **first Office action** on the merits, or before the mailing of a **first Office action** after the filing of a request for continued examination under 37 C.F.R. 1.114; or
- ☐ (2) after the period defined in (1) but before the mailing date of a **final action** or a **notice of allowance** under 37 C.F.R. 1.311, and
- ☐ the requisite Statement is below, **OR**
- ☐ the requisite fee under 37 C.F.R. 1.17(p), namely **\$180.00**, is included herein, or

- ☐ (3) after the mailing date of a **final action** or **notice of allowance** but before the payment of the **issue fee**, **AND**
- ☐ the requisite Statement is below, **AND**
- ☐ the requisite petition fee under 37 C.F.R. 1.17(p), namely **\$180.00** is included herein.


It is respectfully requested that the patent listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

Respectfully submitted,

Date: September 12, 2003  
Reg. No. 44,381

Tel. No.: (617) 310-8327  
Fax No.: (617) 248-7100

VER 12/00  
2682301-1

  
\_\_\_\_\_  
Natasha C. Us  
Attorney for the Applicants  
Testa, Hurwitz, & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, Massachusetts 02110



SHEET 1 OF 1

<b>FORM PTO - 1449</b> <b>SUPPLEMENTAL INFORMATION</b> <b>DISCLOSURE STATEMENT</b>				<b>ATTY DOCKET NO.:</b> INL-052 <b>APPLICANTS:</b> Xu et al. <b>SERIAL NO.:</b> 09/871,885 <b>FILING DATE:</b> May 31, 2001 <b>GROUP:</b> 1744					
<b>U.S. PATENT DOCUMENTS</b>									
<b>EXAM. INIT.</b>		<b>DOCUMENT NUMBER</b>	<b>DATE</b>	<b>NAME</b>	<b>CLASS</b>	<b>SUB CLASS</b>	<b>FILING DATE IF APPROPRIATE</b>		
	A16	4,214,968	07/29/1980	Battaglia et al.					
<b>FOREIGN PATENT DOCUMENTS</b>									
<b>EXAM. INIT.</b>		<b>DOCUMENT NUMBER</b>	<b>DATE</b>	<b>COUNTRY CODE</b>	<b>CLASS</b>	<b>SUB CLASS</b>	<b>FILING DATE</b>	<b>ABSTRACT ONLY</b>	<b>ENGLISH LANG (Y/N)</b>
<b>OTHER ART, JOURNAL ARTICLES, ETC.</b>									
<b>EXAM. INIT.</b>	<b>OTHER DOCUMENTS: (Including Author, Title, Date, Relevant Pages, Place of Publication)</b>								
<b>EXAMINER</b>					<b>DATE CONSIDERED</b>				



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**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23rd day of September, 2003.

*Olivia J. Mannion*  
Olivia J. Mannion

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are: Transmittal Form (1 page); Supplemental Information Disclosure Statement (2 pages); Form PTO-1449 (1 page); Reference Labeled A16; and a return-receipt postcard.

**TRANSMITTAL  
FORM**

Application Serial Number	09/871,885
Filing Date	May 31, 2001
First Named Inventor	Xu
Group Art Unit	1744
Examiner Name	Not yet assigned.
Attorney Docket No.	INL-052
Patent No.	Not applicable
Issue Date	Not applicable

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**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form  <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson Including Drawings [Total Sheets _____]  <input type="checkbox"/> Petition for Extension of Time  <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)  <input type="checkbox"/> Formal Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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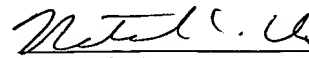
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**SIGNATURE BLOCK**

Respectfully submitted,

Date: September 12, 2003  
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